

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Ronald J. LEBEL, et al.

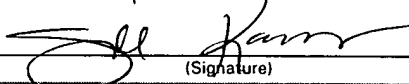
Title: AMBULATORY MEDICAL
APPARATUS WITH
HANDHELD
COMMUNICATION DEVICE

Prior Appl. No.: 09/768,204

Prior Appl. Filing
Date: 1/22/2001

Prior Examiner: Mark Bockelman

Prior Art Unit: 3762

CERTIFICATE OF EXPRESS MAILING	
I hereby certify that this correspondence is being deposited with the United States Postal Service's "Express Mail Post Office To Addressee" service under 37 C.F.R. § 1.10 on the date indicated below and is addressed to: Commissioner for Patents, PO Box 1450, Alexandria, Virginia 22313-1450.	
EV 420554305 US (Express Mail Label Number)	April 14, 2004 (Date of Deposit)
Jose Ramos (Printed Name)	
 (Signature)	

CONTINUING PATENT APPLICATION
TRANSMITTAL LETTER

Mail Stop PATENT APPLICATION
Commissioner for Patents
PO Box 1450
Alexandria, Virginia 22313-1450

Sir:

Transmitted herewith for filing under 37 C.F.R. § 1.53(b) is a:

☐ Continuation ☒ Division ☐ Continuation-In-Part (CIP)

of the above-identified co-pending prior application in which no patenting, abandonment, or termination of proceedings has occurred. Priority to the above-identified prior application is hereby claimed under 35 U.S.C. § 120 for this continuing application. The entire disclosure of the above-identified prior application is considered as being part of the disclosure of the accompanying continuing application and is hereby incorporated by reference therein.

☐ Applicant claims small entity status under 37 CFR 1.27.

Enclosed are:

☒ Specification, Claim(s), and Abstract (142 pages).

☒ Formal drawings (16 sheets, Figures 1-12).

☒ Copy of Parent Declaration and Power of Attorney (5 pages).

☒ Copy of Parent Assignment of the invention.

☐ Assignment Recordation Cover Sheet.

- ☐ Small Entity statement.
☐ Request for application not to be published with certification under 35 USC 122(b)(2)(B)(i).
☐ Information Disclosure Statement.
☐ Form PTO-1449 with copies of ___ listed reference(s).
☒ Preliminary Amendment.
☒ Application Data Sheet (37 CFR 1.76).

The filing fee is calculated below:

	Claims as Filed	Included in Basic Fee	Extra Claims	Rate	Fee Totals
Basic Fee				\$770.00	\$770.00
Total Claims:	19	- 20	= 0	x \$18.00	= \$0.00
Independents:	2	- 3	= 0	x \$86.00	= \$0.00
If any Multiple Dependent Claim(s) present:				+ \$290.00	= \$0.00
				SUBTOTAL:	= \$770.00
<input type="checkbox"/>				Small Entity Fees Apply (subtract 1/2 of above):	= \$0.00
				TOTAL FILING FEE:	= \$770.00
Assignment Recordation Fee:				+ \$40.00	= \$0.00
				TOTAL FEE =	\$770.00

- ☒ A check in the amount of \$770.00 to cover the filing fee and fee for recordation of Assignment is enclosed.
☐ The required filing fees are not enclosed but will be submitted in response to the Notice to File Missing Parts of Application.
☒ The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 50-0872. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 50-0872.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date: April 14, 2004

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By: 

Ted R. Rittmaster

Attorney for Applicant

Registration No. 32,933